



Registration Form

For Coaches & Administrators

Affiliation

League _____

Club _____

Team _____

Please Check All That Apply

<input type="checkbox"/> Coach <input type="checkbox"/> Assistant Coach <input type="checkbox"/> Team Manager <input type="checkbox"/> Team Parent	<input type="checkbox"/> AYSA Administrator <input type="checkbox"/> League Administrator <input type="checkbox"/> Club Administrator <input type="checkbox"/> Volunteer
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Last Name _____ First Name _____ MI _____

Address _____ City _____

AZ	()				
<small>State</small>	<small>Zip Code</small>	<small>Area Code</small>	<small>Telephone Number</small>	<small>Month Day Year Birthdate</small>	<small>Gender M or F</small>

Preference for AYSA Mailings

All	AYSA Specific	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E-mail address _____

Age Bracket _____ Coaching License _____ Referee Grade _____

1. Background in work with youth	Position _____	Year(s) _____
2. Experience in soccer	Position _____	Year(s) _____
3. Experience in youth soccer	Position _____	Year(s) _____

Have you filled out a Disclosure Form? Yes No Year _____

I understand that:

- a. It is the intent of the ARIZONA YOUTH SOCCER ASSOCIATION to deny certification to any person who has been convicted of a crime of violence or a crime against a person.
- b. In applying for an ARIZONA YOUTH SOCCER ASSOCIATION position, the information which I have furnished on this form is subject to verification, which may include a criminal history check.
- c. A disclosure statement must be updated at least every year.

Print Name _____

Signature _____ Date _____

ARIZONA

 YOUTH SOCCER ASSOCIATION
Volunteer Disclosure Form
 PLEASE PRINT CLEARLY

Last name _____ First Name _____ Middle Initial _____

Street Address _____ City _____ State _____ Zip _____

(Street address required, P.O. Box will not be accepted)

EMAIL ADDRESS _____

Gender: M ___ F ___ Phone _____ Date of Birth _____ DL# _____ DL State _____

If a resident of Arizona for less than 5 years, my previous city and state of residence was: _____

Coach License (Module, E, D...) _____ # of Yrs coaching soccer _____ States coached in _____

Referee Grade _____ Which States _____

Please identify your current position(s) by checking all that apply below:

Rec. Coach Comp. Coach ODP Staff Board Member
 Referee Administration Team Manager Parent Volunteer

1. Background in work with youth Position _____ Years _____

2. Experience in soccer Position _____ Years _____

3. Experience in youth soccer Position _____ Years _____

Please Respond to Each Question. Circle appropriate answer; explain all yes responses on back

- | | | |
|---|------------|-----------|
| 1. Have you ever been convicted of a crime of violence or a crime against a person? | Yes | No |
| 2. Have you ever been convicted of a felony? | Yes | No |
| 3. Have you even been subject to any court order involving sexual, physical or verbal abuse, including, but not limited to, a domestic or protection order? | Yes | No |
| 4. Have you ever been adjudged liable for civil penalties or damages involving sexual, physical abuse? | Yes | No |
| 5. Have you ever been asked to resign from any position, paid or unpaid, due to complaint(s) of sexual, physical, or verbal abuse? | Yes | No |
| 6. Do you have any history of sexual, physical or verbal abuse? | Yes | No |
| 7. Have you been suspended from coaching youth soccer, or any youth sport for a period of more than 6 months in any state? If so, please indicate when and where on reverse of this form. | Yes | No |
| 8. Do you have a conviction for the use, possession and/or sale of an illegal substance? | Yes | No |

Read carefully prior to signing below:

I agree that I will abide by the rules of US Youth Soccer and its affiliated organizations (including the Arizona Youth Soccer Association, AYSA). It is the intent of the Arizona Youth Soccer Association to accept coaches, administrators, volunteers, and to utilize referees without a prior history of violence, child abuse and/or neglect, or felony conviction(s). The information given in this statement is subject to verification by the Arizona Youth Soccer Association through any background check organization chosen by AYSA. I understand that I may be required to be fingerprinted for a Department of Public Safety and/or Federal Bureau of Investigation criminal check. Reports may be compiled with information from court repositories, Department of Motor Vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification; to the extent such investigation includes information bearing on my character, general reputation, or personal characteristics. I also understand that any false or misleading information that I provide on this form will result in automatic denied membership for a minimum period of 6 months in the Arizona Youth Soccer Association and being barred from any and all sanctioned activities. **This registration/disclosure statement must be updated every year.**

Applicant Signature _____ Printed Name _____ Date _____

League _____ Club _____ Team _____

Previous League _____ Previous Club _____

